9-35

PATENT

40736 Docket:

# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

D. Panicali, et al.

1813

Serial No.: Filed:

07/579,269

Group No.:

For:

September 5, 1990

Examiner: Recombinant Pox Virus For Immunization Against Tumor-

D. Barnd

Associated Antigens

Commissioner of Patents and Trademarks

Washington, D.C. 20231

# TRANSMITTAL OF APPEAL BRIEF (PATENT APPLICATION-37 CFR 192)

1. Transmitted herewith in triglicate is the APPEAL BRIEF in this application with respect to the February 26, 1993 Notice of Appeal filed on ..

NOTE: "The appellant shall, within 2 months from the date of the notice of appeal under § 1.191 in an application, reissue application, or patent under reexamination, or within the time allowed for response to the action appealed from, if such time is later, file a brief in triplicate.\* 37 CFR 1.192(a) (emphasis added).

## 2. STATUS OF APPLICANT

This application is on behalf of

- other than a small entity

verified statement:

- attached
- already filed
- 3. FEE FOR FILING APPEAL BRIEF

Pursuant to 37 CFR 1.17(f) the fee for filing the Appeal Brief is:

small entity

\$135.00

other than a small entity

\$270.00

135.00 Appeal Brief fee due \$.

#### CERTIFICATE OF MAILING (37 CFR 1.8(a))

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Commissioner of Patents and Trademarks, Washington, D.C. 20231.

<u>Melissa A</u> Topp

(Signature of person mailing paper)

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120 WP 09/09/93 07579269

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660.00 CK

NOTE:		FR 1.191(d). Also see Notice of No	vember 5, 1985 (1060 O.G. 27).
The papply.	roceedings here	in are for a patent application	and the provisions of 37 CFR 1.136
		(complete (a) or (b) as ap	oplicable)
<ul><li>(a)   Applicant petitions for an extension of time under 37 CFR 1.136 (fees: 37 CFR 1.17(a)-(d)) for the total number of months checked below:</li></ul>			
	Extension	Fee for other than	Fee for
	(months)	small entity	small entity
□ one month		\$110.00	\$55.00
□ two months		\$360.00	\$180.00
□ t	hree months	\$840.00	\$420.00
⊠ f	our months	\$1,320.00	<b>\$</b> 660.00
	•	•	Fee \$ 660.00
If an ac	dditional extensi	on of time is required pleas	e consider this a petition therefor.
(check and complete the next item, if applicable)			
An extension for months has already been secured and the fee paid therefor of \$ is deducted from the total fee due for the total			

or

Extension fee due with this request \$\_

(b) Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.

### 5. TOTAL FEE DUE

The total fee due is:

4. EXTENSION OF TERM

Appeal brief fee  $\frac{135.00}{660.00}$  Extension fee (if any)  $\frac{660.00}{100}$ 

TOTAL FEE DUE \$ 795.00

## 6. FEE PAYMENT

 $\boxtimes$  Attached is a check in the sum of \$\frac{795\00}{.00}\$

months of extension now requested.

☐ Charge Account No. \_\_\_\_\_\_ the sum of \$\_\_\_\_.

A duplicate of this transmittal is attached.

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7. FEE DEFICIENCY

NOTE: If there is a fee deficiency and there is no authorization to charge an account, additional fees are necessary to cover the additional time consumed in making up the original deficiency. If the maximum, sixmonth period has expired before the deficiency is noted and corrected, the application is held abandoned. In those instances where authorization to charge is included, processing delays are encountered in returning the papers to the PTO Finance Branch in order to apply these charges prior to action on the cases. Authorization to change the deposit account for any fee deficiency should be checked. See the Notice of April 7, 1986, 1065 O.G. 31-33.

 $\boxed{X}$  If any additional extension and/or fee is required, this is a request therefor and to charge Account No.  $\boxed{04-1105}$ 

### AND/OR

If any additional fee for claims is required, charge Account No. 04-1105

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SIGNATURE OF ATTORNEY
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